Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

### Filing at a Glance

Companies: Hartford Casualty Insurance Company, Hartford Insurance Company of the Midwest, Hartford Underwriters Insurance Company, Property and Casualty Insurance Company of Hartford, Twin City Fire Insurance Company,

Hartford Accident and Indemnity Company, Hartford Fire Insurance Company

Product Name: Business Income Redefinition - SERFF Tr Num: HART-125625557 State: Arkansas

Including Net Loss

TOI: 05.0 Commercial Multi-Peril - Liability & SERFF Status: Closed State Tr Num: EFT \$50

Non-Liability

Sub-TOI: 05.0003 Commercial Package Co Tr Num: FN.07.883.2008.08 State Status: Fees verified and

received

Filing Type: Form Co Status: Initial Filing Reviewer(s): Betty Montesi,

Llyweyia Rawlins, Brittany Yielding

Authors: Joyce Driscoll, Claire Disposition Date: 05/01/2008

Dubord, Marilu Gonzalez, Stephanie Wieczorek, David

Logan, Sima Nizami, Angela Isaac

Date Submitted: 04/29/2008 Disposition Status: Approved

Effective Date Requested (New): 07/12/2008 Effective Date (New): 07/12/2008

07/12/2008

State Filing Description:

### **General Information**

Project Name: Spectrum Status of Filing in Domicile:
Project Number: FN.07.883.2008.08 Domicile Status Comments:

Reference Organization: Reference Number:

Reference Title: Advisory Org. Circular:

Filing Status Changed: 05/01/2008

State Status Changed: 05/01/2008 Deemer Date:

Corresponding Filing Tracking Number:

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

Filing Description:

This filing introduces a form SS 40 55 for use on our Spectrum policies, as outlined in the explanatory memorandum prepared by Sam Wilson.

### **Company and Contact**

#### **Filing Contact Information**

Angela Isaac, Personal Lines Filing Analyst angela.isaac@thehartford.com

Hartford Plaza T-1-54 (888) 717-1957 [Phone] Hartford, CT 06115 (860) 547-5941[FAX]

**Filing Company Information** 

Hartford Casualty Insurance Company CoCode: 29424 State of Domicile: Indiana Hartford Plaza Group Code: 91 Company Type: Property

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-0294398

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Hartford Insurance Company of the Midwest CoCode: 37478 State of Domicile: Indiana Hartford Plaza Group Code: 91 Company Type: Property

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-1008026

....

Hartford Underwriters Insurance Company CoCode: 30104 State of Domicile: Connecticut

Hartford Plaza Group Code: 91 Company Type: Property

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-1222527

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Property and Casualty Insurance Company of CoCode: 34690 State of Domicile: Indiana

Hartford

Hartford Plaza Group Code: 91 Company Type: Property

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-1276326

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Twin City Fire Insurance Company CoCode: 29459 State of Domicile: Indiana Hartford Plaza Group Code: 91 Company Type: Property

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-0732738

-----

Hartford Accident and Indemnity Company CoCode: 22357 State of Domicile: Connecticut

690 Asylum Ave Group Code: 91 Company Type: Property

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-0383030

-----

Hartford Fire Insurance Company CoCode: 19682 State of Domicile: Connecticut

Hartford Plaza Group Code: 91 Company Type:

690 Asylum Avenue

Hartford, CT 06115 Group Name: State ID Number:

(860) 547-5000 ext. [Phone] FEIN Number: 06-0383750

-----

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

# **Filing Fees**

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Hartford Casualty Insurance Company	\$50.00	04/29/2008	19955476
Hartford Insurance Company of the Midwest	\$0.00	04/29/2008	
Hartford Underwriters Insurance Company	\$0.00	04/29/2008	
Property and Casualty Insurance Company of	\$0.00	04/29/2008	
Hartford			
Twin City Fire Insurance Company	\$0.00	04/29/2008	
Hartford Accident and Indemnity Company	\$0.00	04/29/2008	
Hartford Fire Insurance Company	\$0.00	04/29/2008	

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

# **Correspondence Summary**

### **Dispositions**

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	05/01/2008	05/01/2008

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

# **Disposition**

Disposition Date: 05/01/2008

Effective Date (New): 07/12/2008 Effective Date (Renewal): 07/12/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

**Overall Rate Information for Multiple Company Filings** 

Overall Percentage Rate Indicated For This Filing0.000%Overall Percentage Rate Impact For This Filing0.000%Effect of Rate Filing-Written Premium Change For This Program\$0Effect of Rate Filing - Number of Policyholders Affected0

**Net Loss** 

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

Item TypeItem NameItem StatusPublic AccessSupporting DocumentUniform Transmittal Document-Property & Approved<br/>CasualtyYesSupporting DocumentExplanatory MemorandumApprovedYesFormBusiness Income Redefinition - Including ApprovedYes

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

# **Form Schedule**

Review	Form Name	Form #	Edition	Form Type Action	<b>Action Specific</b>	Readability	Attachment
Status			Date		Data		
Approved	Business Income	SS 40 55		Endorseme New		0.00	SS4055.pdf
	Redefinition -	07 08		nt/Amendm			
	Including Net			ent/Conditi			
	Loss			ons			



### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# **BUSINESS INCOME REDEFINITION – INCLUDING NET LOSS**

This endorsement modifies insurance provided under the following:

#### SPECIAL PROPERTY COVERAGE FORM

- **A.** The provisions of this policy apply to the coverage stated in this endorsement, except as indicated below:
  - 1. Paragraph A.5.o.(4) Business Income of the Special Property Coverage form is deleted and replaced with the following:
    - (4) Business Income means the:
      - (a) Net Income (Net Profit or Loss before income taxes), including Rental Income, that would have been earned or incurred if no direct physical loss or physical damage had occurred; and
      - **(b)** Continuing normal operating expenses incurred, including payroll.

If you are operating at a Net Loss, continuing normal operating expenses will not be offset by the Net Loss.

Form SS 40 55 07 08 Page 1 of 1

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

### **Rate Information**

Rate data does NOT apply to filing.

Company Tracking Number: FN.07.883.2008.08

TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0003 Commercial Package

Liability

Product Name: Business Income Redefinition - Including Net Loss

Project Name/Number: Spectrum/FN.07.883.2008.08

# **Supporting Document Schedules**

**Review Status:** 

Satisfied -Name: Uniform Transmittal Document- Approved 05/01/2008

Property & Casualty

Comments:

Uniform Transmittal Document-Property & Casualty is attached.

**Attachment:** 

PC-Transmittal Document.pdf

**Review Status:** 

Satisfied -Name: Explanatory Memorandum Approved 05/01/2008

Comments:

Explanatory Memorandum is attached.

**Attachment:** 

Revised BI - Form Explanatory-V.1.pdf

# **Property & Casualty Transmittal Document**

1. Reserved for Insurance Dept. Use Only				2. Insurance Department Use only					
					a. Date the filing is received:				
						Analyst:			
						Disposition:			
						Date of disposit	ion of the fi	ling:	
						•		mig.	
					e.	Effective date o			
						New Busines			
						Renewal Bus	siness		
					f.	State Filing #:			
					g.	SERFF Filing #	<u>:</u>		
					h.	Subject Codes			
2	Group Name							Group NAIC #	
<u> </u>	Hartford Financial Services Group							00914	
								00914	
4.	Company Name(s)			Domicil	е	NAIC #	FEIN#	State #	
	Hartford Fire Insurance Company			Connect	icut	0091-19682	06-038375	50	
	Hartford Accident & Indemnity Co.			Connect	icut	0091-22357	06-038303	30	
	Hartford Casualty Insurance Company			Indiana		0091-29424	06-029439	98	
	Hartford Underwriters Insurance Compa	any		Connect		0091-30104	06-122252	27	
	Twin City Fire Insurance Company			Indiana		0091-29459	06-073273		
	Trumbull Insurance Company			Connect		0091-27120	06-118498		
	Property & Casualty Insurance Compar	ny of Hartfor	d d	Indiana		0091-34690	06-127632	26	
5.	Company Tracking Number					FN.	07.883.200	3.08	
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Co	ntact Info of Filer(s) or Corporate Offic	cer(s) [incit	ude toli-	Tree num	berj	1			
6.	Name and address	Title	9	Teleph	one #	#s FAX#		e-mail	
	Angela Isaac, Technical Services, HO-GL-19	Filing Analyst				1757.11			
	1 Hartford Plaza, Hartford, CT 06155			860-547-7847		860-547-5941 a		angela.isaac@TheHartford.com	
		•				•			
l _									
	Signature of authorized filer Please print name of authorized filer			Angolo I					
	ng information (see General Instruction	ne for docer	intions	Angela I					
		iis iui uesci	puons	oi tilese i	ieius)				
۵	Type of Insurance (TOI)		СМР						
	Sub-Type of Insurance (Sub-TOI)			um (BOP	))				
	, ,			5.1. 5.2					
	State Specific Requirements]								
12.	Company Program Title (Marketing title)								
	Filing Type			Rate/Los	ss Cos	t Rules		Rates/Rules	
			$\overline{\checkmark}$	Forms		Combination Ra	ates/Rules/F	orms	
				Withdrav		Other	(give desc		
	Effective Date(s) Requested		New:			y 12, 2008	Renewal:	July 12, 2008	
	Reference Filing?			Yes ✓	No				
	Reference Organization (if applicable)		N/A						
17.	Reference Organization # & Title		N/A						
			Δ	0 000					
18.	Company's Date of Filing Status of filing in domicile		April 2	9, 2008 Not Filed	<b>1</b> []	Donding	Authorized	d Disapproved	

# **Property & Casualty Transmittal Document—**

20. This filing transmittal is part of Company Tracking # FN.07.883.2008.08
21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
This filing introduces form SS 40 55 for use on our Spectrum policies, as outlined in the explanatory memorandum prepared by Sam Wilson.
22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]
Check #: EFT Amount: \$50.00
Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

# EXPLANATORY MEMORANDUM - FORMS SPECTRUM POLICY

This filing introduces a new form for use with our Spectrum policies.

\_\_\_\_\_

### 1. New Form

New Form Number	Form Title
SS 40 55 07 08	Business Income Redefinition – Including Net Loss

### 3. Explanation of New Form

#### SS 40 55 07 08: Business Income Redefinition - Including Net Loss

This is an optional form that redefines the business income coverage of the Special Property Coverage form to include normal continuing operating expenses if the insured is operating at a net loss.

<u>Use:</u> Optional form that can be selected when the policy includes business income and extra expense for all rating programs except Apartments and Fast Food/Family Style Restaurants.

Prepared by:

Samuel Wilson, AU AIS

Spectrum Product Specialist

Applied Research and Product Development

The Hartford Insurance Group samuel.wilson@thehartford.com

(860) 547-9438

